FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

ONB APPROVAL	
OMB Number: 3235-0076	٦
Expires: May 31, 2005	1
Estimated average burden	ı
hours per response 16.00	

SEC	JSE ONL	Y
Prefix		Serial
DATE	RECEIVE	D
		

Filing Under (Check box(es) that apply):	Rule 504 🔲 Rule 505 🛛 Rule	506 Sec	tion 4(6)	ULOE /	16.//
Type of Filing: \square New Filing \boxtimes Ame	ndment			 	JUL 2 1 2003 >>
ing diagnosis and the state of	A. BASIC IDEN	TIFICATION	T.D.A.T.A.		
1. Enter the information requested about the		TIFICATION	DAIA	Yelli Carlos Indiana	
Name of Issuer (check if this is an amendm		cate change.)			187/3
TriGeo Network Security, Inc.					
Address of Executive Offices	(Number and Street, Ci	ity, State, Zip	Code)	Telephone Numbe	r (Including Area Code)
510 Clearwater Loop, Ste. 203, Post Falls, Ida	ho 83854			(208) 664-7000	
Address of Principal Business Operations	(Number and Street, Ci	ity, State, Zip	Code)	Telephone Numbe	r (Including Area Code)
(if different from Executive Offices)					
Brief Description of Business				<u> </u>	
Computer Network Security					
Type of Business Organization					TO THE COLOR OF THE STATE AND THE STATE OF T
☐ corporation	imited partnership, already formed		othe	er (please specify):	03028008
business trust	imited partnership, to be formed				· · · · · · · · · · · · · · · · · · ·
		Month	Year		- ASS

GENERAL INSTRUCTIONS

Series A-1 Preferred Stock Offering

Who, Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. of INAMS 77d(6).

ID

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and ma	anaging partner of p	partnership issuers.						
Check Box(es) that Apply:	Promoter	Beneficial Owner	r 🛛	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if i Michelle L. Dickman (and Mi		use and beneficial own	er)					
Business or Residence Address	(Number and Str	eet, City, State, Zip Cod	le)					
510 Clearwater Loop, Suite 2								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owne	r 🛛	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i Geoffrey Rinehart	ndividual)							
Business or Residence Address	(Number and Str	reet, City, State, Zip Coo	le)					
510 Clearwater Loop, Suite 2								
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owne	r 🔲	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i Craig Tedmon, ScD	ndividual)							
Business or Residence Address 10476 Lakeview Road, Hayde	`	reet, City, State, Zip Coo						
Check Box(es) that Apply:	Promoter	☑ Beneficial Owne	r 🔲	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if it Big Horn Ventures (Thomas	Stoeser, agent)							
Business or Residence Address 4752 W. Riverbend Avenue, I			le)	-				
Check Box(es) that Apply:	Promoter	Beneficial Owne	r 🔲	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if is Stephen Meyer	ndividual)							
Business or Residence Address	(Number and Str	eet, City, State, Zip Coc	le)					
_10500 Hayden Bluff Lane, Ha	ayden Lake, Idaho	83835						
Check Box(es) that Apply:	Promoter	Beneficial Owne	r 🔲	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in John Shovic	ndividual)							
Business or Residence Address 912 Sierra Nevada Rd., Ward		reet, City, State, Zip Cod	le)		·			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	г 🗖	Executive Officer	. 🗆	Director		General and/or Managing Partner
Full Name (Last name first, if is Ben R. Rolphe	ndividual)							
Business or Residence Address	(Number and Str	eet, City, State, Zip Cod	le)					
12908 N. Strahorn, Hayden L		<u></u>						
Check Box(es) that Apply:	Promoter	Beneficial Owner	r 🔲	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in WT Richards								
Business or Residence Address 8836 N. Hess, Suite D, Hayder		reet, City, State, Zip Cod 35	le)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	r 🔲	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in	ndividual)	,						
Business or Residence Address	(Number and Str	eet, City, State, Zip Cod	le)		,	·		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	r 🗍	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if it	ndividual)			-				
Business or Residence Address	(Number and Str	eet, City, State, Zip Cod	le)					
	(Use b	olank sheet, or copy and	use add	itional copies of this s	sheet, a	s necessary.))	

Training.	ing water. Magazyak			В.	INFOR	MATION	ABOUT (OFFERIN	Ģ				
1. H	las the issuer	sold, or do	es the issuer	intend to se	ell, to non-ac	ccredited in	vestors in th	is offering?				Yes	No
		0010, 01 00					f filing unde					_	
2. V	Vhat is the min	nimum invest								2		N/A	
*				•								Yes	No
3. I	Ooes the offering	ng permit joit	nt ownership o	of a single uni	it?							⊠	
4. E	Inter the inform	nation reques	sted for each r	nerson who h	as been or wi	II he naid or	given directl	v or indirectly	√ anv				
c	ommission or	similar remu	neration for	solicitation o	f purchasers	in connection	n with sales	of securities	in the				
. o	ffering. If a p nd/or with a s	person to be l tate or states.	listed is an as	sociated pers	on or agent o er or dealer.	of a broker or If more than	dealer regist	ered with the	e SEC ed are				
	ssociated perso												
	ame (Last nar	me first, if i	ndividual)							·····			
None	ss or Resider	ce Address	(Number an	d Street Ci	try State 7i	n Code)			 -				<u></u>
Dusjile	ss of Resider	ice Address	(Number an	iu siitei, Ci	ty, State, Zi	p Code)						-	
Name	of Associated	Broker or	Dealer									-	
States	n Which Per	son Listed I	las Solicited	or Intends	to Solicit Pr	urchasers							
											_		
(Check "All Sta	ates" or checl	c individual S	tates)			•••••••				Ц	All Sta	ites
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID)]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	-
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[P <i>i</i>	
	me (Last nar			[17]	[OI]	<u>[</u>	[VA]	[WAJ	1,,,,	[**1]	[**-[]		X)
Busine	ss or Residen	ice Address	(Number an	d Street, Ci	ty, State, Zi	p Code)	-						
Name o	of Associated	Broker or	Dealer								_		
States i	n Which Per	son Listed I	las Solicited	or Intends	to Solicit Pu	ırchasers							_~
1	Cl1 #411 Cr										_	411.0	
, (Check "All Sta	ates" or check	c individual S	tates)	******************	***************************************		•••••	•••••	••••••	Ц	All Sta	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID)]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	-
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[P <i>I</i> [PI	
	ime (Last nar				<u></u>						<u></u>	L	<u>-1</u>
Busine	ss or Residen	ce Address	(Number an	d Street, Ci	ty, State, Zi	p Code)	· •• <u>-</u>			-	<u>.</u>		
Nom-	£ A i - A - J	D1	D1										
name (of Associated	Broker or	Dealer										
States i	n Which Per	son Listed I	las Solicited	or Intends	to Solicit Pu	ırchasers					J		
(Check "All Sta	ites" or check	individual Si	ates)								All Sta	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	_
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] -[WI]	[OR] [WY]	[P <i>A</i> [PF	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PRO	OCEEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already se Sold
	Debt		\$ 0
,			· · · · · · · · · · · · · · · · · · ·
	Equity	\$ 1,000,000	\$_520,000
	——————————————————————————————————————	6 0	c 0
	Convertible Securities (include Warrants)	\$0	. \$0
	Partnership Interests	\$0	\$0_
	Other (Specify Unit)	\$0	<u> </u>
	Total	\$0	\$0
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	9	\$_520,000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only).		\$ \$
	Answer also in Appendix, Column 4, if filing under ULOE.		
	Answer also in Appendix, Column 4, it filling under GLOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		S
	Regulation A		\$
•	Rule 504		s
	Total		·
	1000		·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<u> </u>
	Printing and Engraving Costs		□\$ <u>100</u>
	Legal Fees		■ \$ 1,000
	Accounting Fees		□\$ <u> </u>
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		<u> </u>
	Other Expenses (identify)		
	Tatal		M 6 1 100

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEE	$\hat{\mathbf{DS}}$
		regate offering price given in response to Part C - n response to Part C - Question 4.a. This difference r."		\$ 519,900
5.	used for each of the purposes shown. If t estimate and check the box to the left of	gross proceeds to the issuer used or proposed to be he amount for any purpose is not known, furnish an the estimate. The total of the payments listed must ssuer set forth in response to Part C - Question 4.b.		
	above.		Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		□\$	□\$
	Purchase of real estate			
	Purchase, rental or leasing and installation and equipment	of machinery		□\$
	Construction or leasing of plant buildings	and facilities	□\$	\$
•	Acquisition of other businesses (including offering that may be used in exchange issuer pursuant to a merger)		□\$	\$
	Repayment of indebtedness			 \$
	Working capital		□\$	⊠ \$ <u>519,900</u>
	Other (specify):			
			□\$	□\$
			\$	□\$
	Column Totals		□\$	□\$
	Total Payments Listed (column totals adde	d)	⊠ \$_519	,900
		D. FEDERAL SIGNATURE		a company of the comp
ign	ture constitutes an undertaking by the issue	ed by the undersigned duly authorized person. If this not to furnish to the U.S. Securities and Exchange Commiscoredited investor pursuant to paragraph (b)(2) of Rule 5	sion, upon written requ	
	er (Print or Type)	Signature Da		
	eo Network Security, Inc.	Mululut	7/10/03	
Van	e of Signer (Print or Type)	Pitle of Signer (Print or Type)		
	nelle L. Dickman	President and CEO		

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1	E. STATE SIGNATURE
-	1. Is any party described in 17 CFR 230.252 presently subject to any of the disqualification Yes No provisions of such rule?
	See Appendix, Column 5, for state response.
	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.
	Issuer (Print or Type) Signature Date
	TriGeo Network Security, Inc. Wulcele 65 + 110/03
	Name of Signer (Print or Type) Title of Signer (Print or Type)
	Michelle L. Dickman President and CEO

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX				
1	Intend to non-a	to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	of investor and urchased in State et C-Item 2)	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	105	1,10		Intestors	7 tilloune	Investors	111104111	1.03	1,0
AK									
AZ									
AR									
CA	-								<u></u>
СО									
СТ	-								
DE	 				-		· · · · · · · · · · · · · · · · · · ·		
DC	 								
FL									
GA									
HI									
ID		1	Common Stock / \$1,000,000	6	\$460,000				1
i IL						_		·- <u>-</u> -	
IN									
IA				Ų					
KS									
KY									
LA									
ME			,						
MD		ı						!	
MA									
MI									
MN									
MS									

				APP	ENDIX	4			
1	Intended to non-a	2 to sell accredited s in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount p (Pa		Disqual under Sta (if yes explan waiver	5 ification ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT								,	
NE									
. NV									
NH									
NJ									
NM									
NY									,
NC									
ND							,		
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX						(
UT									
VT									
VA									
WA		٠.	Common Stock / \$1,000,000	3	\$60,000		· ·		1
WV		·							
WI								***	

1	d v . ()	2.	3			4		Disqual	5 ification
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	,	amount p	of investor and urchased in State t C-Item 2)		under Sta (if yes, explant waiver	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

3102703_1.DOC